

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):  <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>TELEPHONE NO.:</div> <div>FAX NO. (Optional):</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>E-MAIL ADDRESS (Optional):</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>ATTORNEY FOR (Name):</div> </div>	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
<b>MARRIAGE OF</b> PETITIONER:  RESPONDENT:	
<b>NOTICE OF MOTION AND DECLARATION FOR JOINDER</b>	

**NOTICE OF MOTION**

1. TO ☐ Petitioner ☐ Respondent

2. A hearing on this motion for joinder will be held as follows:

a. Date:	Time:	Dept.:	Rm.:
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b. The address of court: ☐ is shown above ☐ is:

c. ☐ Petitioner ☐ Respondent ☐ Claimant will apply to this court for an order joining claimant as a party to this proceeding on the grounds set forth in the Declaration below.

3. The pleading on joinder accompanies this notice of motion.

Dated:

(TYPE OR PRINT NAME)		(SIGNATURE)
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**DECLARATION FOR JOINDER**

4. The name of the person to be joined is:

5. Facts showing that each person sought or seeking to be joined possesses or controls or claims to own any property subject to disposition by this court, or that such person has or claims custody, physical control, or visitation rights with respect to any minor child of the marriage, are (*specify*):

PETITIONER:	CASE NUMBER:
RESPONDENT:	

6. Facts showing that it would be appropriate for this court to determine the particular issue in the proceedings are:

7. Facts showing that each person sought or seeking to be joined is either indispensable to a determination of the particular issue or necessary to the enforcement of any judgment rendered on the issue are:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

	▶	
(TYPE OR PRINT NAME)		(SIGNATURE OF DECLARANT)